DISCLOSURE SUMMARY PAGE DEC 3 0 2002  COMMITTEE NAME (Must be same as on Statement of Organization)  Adamson  For Suffering for:  (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate	Audited	DISCLOSURE REPORT
( 5 )County PAC ( 6 )Ballot Issue/Franchise Committee ( 7 )County/City Central Committee ( 8 )Support Slate of Candidates		
SIGNATURE OF TREASURER (or person filing this report)  TELEPHONE	DATE	SIGNED
Routine Penalties Due For Late Filed Reports Range fron	n \$20 to \$800	
☐CHECK IF AMENDMENT TO REPORT DATED Local	al Committees, enter [	Date of Election
Coulting to file reports until a Notice of Dissolution Form DR-3.	ovember thy & Local Committee the Election is held Scott	
	/46	0.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD  Schedule B: Expenditures total (Attach Schedule B)		
Schedule F: Loan Repayments total (Attach Schedule F)		2.35
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$0	
UNPAID BILLS (From Schedule D - Attach Schedule D)	s <u> </u>	
N KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	<b>s</b> 2/8	9.65
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	<b>s</b>	<i></i>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)	YE	s <u>/</u> no
/ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	

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### **CONTRIBUTIONS - MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Mus	t be same	as on Statement of Organization)
Adamson	For	Supervisor

A (Rev. 06/97)	MONETARY RECEIPTS
CHECK THIS BOX II	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 688.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/15/02	CK#	George N. McDowell 27036 Lakeview Court Eldridge, IA 52748		\$ 100. <sup>w</sup>	V
10/15/02	CK#	Sammy Pierce PO BOX 845 Keukuk IA 52632		Z00.°0	V
16/15/07		Unitemized Contributions		716.	V
10/17/02	ID# 6/35 CK# 20179	Lowa Realtors PAC Committee ID# 6175 1370 NW 1147 5 # 100 Clive, IA 50325		200.00	
10/18/02	CK#	Mildred L. Schnekloth 21559 Leclaire Ry Eldridge, IA 57148		50	
10/19/02	CKIR	Unitemized Contributions		115-	
10/22/02	ID# CK#	Jamie Howard 2473 Elm ST Davenport IA 52803		50.	
10/25/02	CK#	Sammy Pierce PO Box 845 Kenkuk, IA 52632		200.	
10/25/02	ID# CK#	Robert B. Woodham 25/01 188th ST P.V. IA		166,-	
10/25/02	ID# CK#	Unitemized Contributions	SUB-TOTAL	15.	

TOTAL (if last page of this schedule)

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<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by some formal degree) (Sée Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FUI HISH BURGERS OF DECK OF FORM

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(Including candidate's personal funds)

	_	CHECK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)		AMENDING FORM
Adamson For Supervisor		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE KWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/26	ID#	George A. Goebel 4301 E. 53rd ST		s	
10/29,	CK#			J	į
		Davenport IA 52807			
130/02	CK#	Unitemized Contributions		100 70	
15.7	ID#	Gregory D. Trudell			
14/	CK#	Un: temized Contributions Gregory D. Trude 11 209 Park Aue BeHendorf, IA 52722		50.	
	ID#	Be Hendort , IA 53/82		30,	
		1			
	CK#		:		
	ID#				
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	CK#	·	·. <del>-</del>		
	ID#				
	CK#				
	ID#				
	СК#				
	ID#				
	CK#				
	ID#				
	CK#				

SUB-TOTAL

\$200

JUNEDULE A

(Rev. 06/97)

MONETARY

RECEIPTS

TOTAL (if last page of this schedule)

\$ 1460.

ege (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee; Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by some committee; Relationship must be shown to the third degree of contributor is the same as candidate, but there is no to be a familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

### EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
Ad	am 50n	For Superusor		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRÉSS TO WHOM EXPENDITURE (Disbursament) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/25/02	ID# CK# 523	Greg Adamson 4260 Winston Pl Bettendorf, IASIN	Scott County Republicans central Committee Mailing of brochures, pnift; Campaigh letter, etc.	\$ 1150,00
1/5/02	ID# CK# 524	Greg Adamson 1760 Winston Pl Bettendort Its 2722		274.24
11/15/02	ID# CK# 525	Greg Adamson 4260 Winston Pl Betlendorf, IAS2722	See attached	332.40
10/31/07	ID#	Quad City Bank 4500 Bredy St Davenpart, IA52806	Bank service fees	16.70
	ID# CK#			
	ID# CK#	•		
	ID# CK#			
	ID# CK#			
	· · · · · · · · · · · · · · · · · · ·		SUB-TOTAL	\$ 1767.34

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 56.6(3)(i).)

Page \_\_\_\_\_ of \_\_\_\_

TOTAL (if last page of this schedule)

176734

FOR INSTRUCTIONS,	SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 06/97)	IN KIND CONTRIBUTIONS
Adamson For Supervisor		KTHIS BOX IF DING FORM

SCHEDULE

DATE RECEIVED (MW/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE " (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
10/15/02	Bill Fennelly 1117 Garfield CT Double 1200 + # 52804		Food, beer +	87.10	V
12/13/02	Greg Rdamson 4260 Winston Pl Bettendorf IA 52722	Candiolate	Forginess of loans balance	2102.65	
	•				
	· · · · · · · · · · · · · · · · · · ·		SUB-TOTAL	\$ 87.00	
			TOTAL (if lest page of this schedule)	3 2189:65	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_\_ (for Schedule E) ADAMSON FOR SUPERVISOR CHECK #524 TO GREG ADAMSON REIMBURSEMENT OF EXPENSES CHECK DATED: November 5, 2002

VENDOR	PURPOSE	AMOUNT
Sam's Club	Candy for parades	52.61
Walgreens	file folders	8.63
U.S. Post Office	stamps & post cards/with stamps	213.00
TOTAL		274.24

# ADAMSON FOR SUPERVISOR CHECK #525 TO GREG ADAMSON REIMBURSEMENT OF EXPENSES CHECK DATED: November 15, 2002

K&K	Rerod for signs	9.37
K&K	stamps	69.00
R J Boars	lunch for help Halloween Parade	69.03
U S Post Office	stamps	111.00
U S Post Office	stamps	37.00
U S Post Office	stamps	37.00
		332.40

1	ME(Must be same as on Statement of Organia	•				(Rev. 08/96) RI	OANS ECEIVED REPAID
NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.  TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 4000.00						CHECK THIS BOX IF AMENDING FORM	
(Origi	ETARY LOANS RECEIVED THIS REPORTING that source of loan, such as a bank, must be showed. Include loans from candidate's personal fur	own if a third party is		PART II - MC	ONETARY LOAN REPAYMENTS MADE <u>THIS</u> ans forgiven must be reported on Schedule E	REPORTING PERIOR - In-kind Contributions	D s.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN	DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
	·	·	\$	12/ /13/ Official CK Fr Bank	Greg Adamson 4266 Winston Pl Bettendurf, IA 52722	Candidate	\$ 1897.35
		·	÷				
					· ·		
						•	
TOTAL (PART I) \$			TOTAL CASH REPAYMENTS (PART II) \$ 1897.3				
		.i 3		TOTAL C	From Schedule E TOTAL LOANS FORGIVI	EN \$	2/02.65
making a contri consanguinity ( packet.) If surr	requires candidate committees to disclose the ibution to the committee. Relationship must be (blood relatives) and affinity (relatives by marrianame of contributor is the same as candidate, buter "not applicable" in the relationship column we	relationship of any re shown to the third de ge). (See Page 2 of f ut there is no familial	lative gree of		Page	of(for Schedule F)	